Medical Gas Endorsement Application

Board of Plumbers 301 S Park Ave PO Box 200513 Helena MT 59620-0513 (406) 841-2339 or 2329

After April 1, 1996, a person may not install pipe used solely to transport gases used for medical purposes unless the person holds a valid medical gas piping installation endorsement issued by the State of Montana Plumbing Board. In order to receive an endorsement, please submit the following:

following:				
training program accepinstallation of medical Welding and Brazing C Attach the \$60.00 App	that provides proof you ha stable to the Board and have gas systems, based on NF	ve obtaine PA 99C a e to "Boar	nd Section IX of the ASME rd of Plumbers")	
Please Print or Type				
Applicants Name Last Name	First Name		Middle Initial	
Applicants Address Mailing Address	City	State	Zip	
Date of Birth Social Security Number				
Present Employer:				
Address of Employer:				
Licenses/Endorsements Held		<u> </u>		
Type of License LIC#	State Where License H	Ield	Date License Received	

Training Programs Completed:

Name of Program	Sponsor	Dates Attended
Have any legal or disciplinary your past practices or your ur		against you which allege impropriety of YesNo
f yes, what was the outcome	of the proceedings?	
	. 100: 101:	(Failure to accurately
urnish the information requested in qu	lestions 1 & 2 is grounds for denia	al or revocation of your endorsement.)
I hereby swear that the forego	oing statements are true a	nd correct:
Signature of Applicant:		